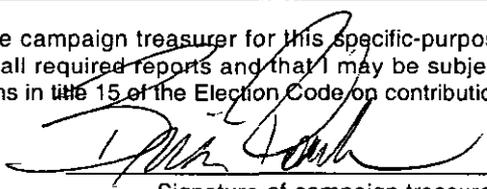


# APPOINTMENT OF A CAMPAIGN TREASURER BY A SPECIFIC-PURPOSE COMMITTEE

FORM STA  
6148 PG 1

See STA INSTRUCTION GUIDE for detailed instructions.		1	Total pages filed: <b>5</b>	
2	COMMITTEE NAME	Progressive Action		<b>OFFICE USE ONLY</b>
3	COMMITTEE ADDRESS	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE 1100 Guadalupe, Austin, Texas 78701		RECEIVED 2006 FEB - 3 PM 2:47 CLERK TRAVIS COUNTY TEXAS
4	CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Brian Roark NICKNAME LAST SUFFIX		
5	CAMPAIGN TREASURER STREET ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #: CITY: STATE: ZIP CODE 1100 Guadalupe, Austin, Texas 78701		Receipt # HD/PM Amount Date Processed Date Processed
6	MAILING ADDRESS <input checked="" type="checkbox"/> same as above	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE		
7	CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION ( 512 ) 476-4873		
8	PERSON APPOINTING TREASURER	FIRST MI LAST SUFFIX Aaron Mueller		
9	SIGNATURE	I understand that I have been appointed as the campaign treasurer for this specific-purpose committee and that I am responsible for filing all required reports and that I may be subject to fines for failure to do so. I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations.  Signature of campaign treasurer		
10	ASSISTANT CAMPAIGN TREASURER (see instructions)	FIRST MI LAST SUFFIX Aaron Mueller		
11	ASSISTANT CAMPAIGN TREASURER ADDRESS	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE 605 W. 10th Street, Austin, Texas 78701		
12	ASSISTANT CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION ( 512 ) 474-9999		

GO TO PAGE 2

# SPECIFIC-PURPOSE COMMITTEE: PURPOSE AND MODIFIED REPORTING DECLARATION

FORM **STA**  
PG 2

**13** COMMITTEE NAME

Progressive Action

**14** COMMITTEE PURPOSE

OFFICE USE ONLY

- SUPPORT CANDIDATE
- OPPOSE CANDIDATE
- ASSIST OFFICEHOLDER

CANDIDATE / OFFICEHOLDER NAME

Dana DeBeauvoir

OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)

Travis County Clerk

- SUPPORT MEASURE
- OPPOSE MEASURE

BALLOT IDENTIFICATION OF MEASURE / #

ELECTION DATE  
Month / Day / Year

DESCRIPTION

**15**  
MODIFIED REPORTING DECLARATION

### COMPLETE THIS SECTION ONLY IF YOU ARE CHOOSING MODIFIED REPORTING.

**\*\*This declaration must be filed no later than the 30th day before the first election to which the declaration applies. \*\***

**\*\*The modified reporting declaration is valid for one election cycle only. \*\***  
(An election cycle includes a primary election, a general election, and any related runoffs.)

The committee does not intend to accept more than \$500 in political contributions or make more than \$500 in political expenditures (excluding filing fees) in connection with any future election within the election cycle. The committee understands that if either one of those limits is exceeded, the committee's campaign treasurer will be required to file pre-election reports and, if necessary, a runoff report.

\_\_\_\_\_  
Year of election(s) or election cycle to which declaration applies

\_\_\_\_\_  
Signature of campaign treasurer

**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**

**This appointment is effective on the date it is filed with the appropriate filing authority.**

**SPECIFIC-PURPOSE COMMITTEE:  
PURPOSE AND MODIFIED REPORTING DECLARATION**

**FORM STA  
PG 2**

**13** COMMITTEE NAME  
Progressive Action

<b>14</b> COMMITTEE PURPOSE	OFFICE USE ONLY
-----------------------------	-----------------

<input checked="" type="checkbox"/> SUPPORT CANDIDATE	CANDIDATE / OFFICEHOLDER NAME Sarah Eckhardt
<input type="checkbox"/> OPPOSE CANDIDATE	

<input type="checkbox"/> ASSIST OFFICEHOLDER	OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) Travis County Commissioner Precinct 2
--	---

<input type="checkbox"/> SUPPORT MEASURE	BALLOT IDENTIFICATION OF MEASURE / #	ELECTION DATE Month / Day / Year
--	--------------------------------------	-------------------------------------

<input type="checkbox"/> OPPOSE MEASURE	DESCRIPTION
---	-------------

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\_\_\_\_\_  
Year of election(s) or election cycle to which declaration applies

\_\_\_\_\_  
Signature of campaign treasurer

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# SPECIFIC-PURPOSE COMMITTEE: PURPOSE AND MODIFIED REPORTING DECLARATION

FORM **STA**  
PG 2

**13** COMMITTEE NAME  
Progressive Action

**14** COMMITTEE PURPOSE OFFICE USE ONLY

SUPPORT CANDIDATE  
 OPPOSE CANDIDATE  
 ASSIST OFFICEHOLDER

CANDIDATE / OFFICEHOLDER NAME  
Margaret Gomez

OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)  
Travis County Commissioner Precinct 4

SUPPORT MEASURE  
 OPPOSE MEASURE

BALLOT IDENTIFICATION OF MEASURE / # ELECTION DATE  
Month: / Day: / Year

DESCRIPTION

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\_\_\_\_\_  
Year of election(s) or election cycle to which declaration applies

\_\_\_\_\_  
Signature of campaign treasurer

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# SPECIFIC-PURPOSE COMMITTEE: PURPOSE AND MODIFIED REPORTING DECLARATION

FORM **STA**  
PG 2

**13** COMMITTEE NAME

Progressive Action

**14** COMMITTEE PURPOSE

OFFICE USE ONLY

SUPPORT CANDIDATE

CANDIDATE/OFFICEHOLDER NAME

Eric Shepperd

OPPOSE CANDIDATE

ASSIST OFFICEHOLDER

OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)

County Court at Law 2

SUPPORT MEASURE

BALLOT IDENTIFICATION OF MEASURE / #

ELECTION DATE  
Month / Day / Year

OPPOSE MEASURE

DESCRIPTION

**15**

MODIFIED  
REPORTING  
DECLARATION

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\_\_\_\_\_  
Year of election(s) or election cycle to  
which declaration applies

\_\_\_\_\_  
Signature of campaign treasurer

**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**

**This appointment is effective on the date it is filed with the appropriate filing authority.**

